

UNITED STATES DISTRICT COURT
for the
Southern District of New York

Ian Vasquetelles, on behalf of himself and others
similarly situated in the proposed FLSA
Collective Action,

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)

Plaintiff(s)

v.

Civil Action No. 1:22-cv-03525

LHCSA Home Health Holdings, LLC, LHCSA
Management LLC, and Honor Health Network,
LLC,

)
)
)
)
)

Defendant(s)

)

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)* See Rider Attached.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Levin-Epstein & Associates, P.C.
60 East 42nd Street, Suite 4700
New York, New York 10165

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

CLERK OF COURT

Date: 05/03/2022

/S/ V. BRAHIMI

Signature of Clerk or Deputy Clerk



Civil Action No. 1:22-cv-03525

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))

This summons for (*name of individual and title, if any*) _____
was received by me on (*date*) _____.

I personally served the summons on the individual at (*place*) _____
on (*date*) _____; or

I left the summons at the individual's residence or usual place of abode with (*name*) _____,
_____, a person of suitable age and discretion who resides there,
on (*date*) _____, and mailed a copy to the individual's last known address; or

I served the summons on (*name of individual*) _____, who is
designated by law to accept service of process on behalf of (*name of organization*) _____
on (*date*) _____; or

I returned the summons unexecuted because _____; or

Other (*specify*): _____

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00 _____.

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

_____ *Printed name and title*

_____ *Server's address*

Additional information regarding attempted service, etc:

LEVIN-EPSTEIN & ASSOCIATES, P.C.

60 East 42nd Street • Suite 4700 • New York, New York 10165
T: 212.792-0046 • E: joshua@levinestein.com

RIDER

LHCSA Home Health Holdings, LLC
329 East 149th Street, 3rd Floor
Bronx, NY 10451

LHCSA Home Health Holdings, LLC
100 Challenger Road
Ridgefield Park, NJ 07660

LHCSA Home Health Holdings, LLC
4813 Jonestown Road, Suite 201
Harrisburg, PA 17109-1749

LHCSA Management LLC
329 East 149th Street, 3rd Floor
Bronx, NY 10451

LHCSA Management LLC
100 Challenger Road
Ridgefield Park, NJ 07660

LHCSA Management LLC
4813 Jonestown Road, Suite 201
Harrisburg, PA 17109-1749

Honor Health Network, LLC
329 East 149th Street, 3rd Floor
Bronx, NY 10451

Honor Health Network, LLC
100 Challenger Road
Ridgefield Park, NJ 07660

Honor Health Network, LLC
4813 Jonestown Road, Suite 201
Harrisburg, PA 17109-1749